I sertify that the above bill is correct and just and that payment has not been received  FOIAb3b (Sign original only)  Date 6-25-57 *Payer  e not required when a like certificate is made by payer on attach	sary  overnment B/L No  (F)  Differ	QUANTITY ayee must NO	UNIT Cost	SAPC / COPY / PRICE Per  Total space)	\$ 10	NT Cb. 03.71	
THE UNITED STATES, Dr.,  Payee's Account No.  (Give place and date)  Payee's Account No.  (Payee)  (Address)  (City)  ARTICLES OR SERVICES (Enter description, item number of contract schedule, and other information deeme Discount Terms  Cost  Cost  Payment:  Complete   Partial   Use continuation sheet(s) if necessify that the above bill is correct and just and that payment has not been received FOIAb3b  (Sign original only)  Date 6-25-57 *Payee	(State) or Federal supply d necessary) sary overnment B/L No	QUANTITY ayee must NO	UNIT Cost	SAPC / COPY / PRICE Per  Total space)	/ # 7/02 OF 2  AMOU Dollars	NT Cbs. 03.71	
THE UNITED STATES, Dr.,  Payee's Account No  To	(State) or Federal supply d necessary) sary overnment B/L No	QUANTITY ayee must NO	UNIT Cost	PRICE Per  Total space)	AMOU Dollars	NT Cb. 03.71	
THE UNITED STATES, Dr.,  Payee's Account No	(State) or Federal supply d necessary) sary overnment B/L No	QUANTITY ayee must NO	UNIT Cost	PRICE Per  Total space)	AMOU Dollars	NT Cb. 03.71	
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No. and Date of Order    Date of Delivery or Service	sary  overnment B/L No  (F)  Differ	QUANTITY	Cost  T use this	Per Total space)	Dollars  10	03.71	
PAYMENT:  Complete Partial Final Use continuation sheet(s) if necessity that the above bill is correct and just and that payment has not been received  FOIAb3b (Sign original only)  Oate  ARTICLES OR SERVICES (Enter description, item number of contract schedule, and other information deeme Discount Terms  Use continuation sheet(s) if necessity that the above bill is correct and just and that payment has not been received FOIAb3b (Sign original only)  Oate  6-25-57  *Payee	sary overnment B/L No (F	ayee must NO	Cost  T use this	Per Total space)	Dollars  10	03.71	
No. and Date of Order    Date of Delivery or Service   Cost	sary iovernment B/L No (F) Differ	ayee must NO	Cost  T use this	Per Total space)	Dollars  10	03.71	
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Date 6-25-57 *Payer e not required when a like certificate is made by payer on attach						2/5 M	
e not required when a like certificate is made by payee on attach					1		
e not required when a like certificate is made by payee on attach						<b>-</b>	
	ed bill or bills)	nount verified;	correct for		10.	3 71	
PerTitle	(S	gnature or init	ials)				
Contract No. Alol Date Reg. No.		Date		nvoice Rec'			
Pursuant to authority vested in me, I certify that this account is correct and proper for	payment.						
Approved for \$	†	(Authoriz					
SIGN							
ORIGINAL ONLY	Title						
Title	Date						
THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OF							
		<u>11 3 - 12 3- 113</u> G				satisfier	
ACCOUNTING CLASSIFICATION (Appropriation Symbo	l must be shown; o	ther classificat	ion option	al)			
	•	S. C. S. C. S. C.		- 14141	.*	area y	
Check No dated, 19, fo	r \$		on Trea	surer of the	United States is	n favor of	
Paid by Cash, \$, on, 19,						**	
*When a voucher is signed or received in the name of a company or 2017 to the asme, owriting the company or condend the first and to the light of the case may be.  'John Doe Company, per John Smith, Secretary', or "Treasurer", as the case may be.  If the ability to certify and authority to approve are combined in one person, one signature essary; otherwise the approving officer will sign on the line below "Approved for \$	Payee		(Sign original	only)			

## Approved For Release 2000/04/11: CIA-RDP64-00360R000500050120-9 METHOD OF OR ABSENCE OF ADVERTISING

## METHOD OF ADVERTISING

	Advertising in newspapers Yes Nodealers.  (a) Advertising by circular letters sent todealers.  (b) And by notices posted in public places Yes No No.
	(If notices were not posted in addition to advertising by circular letters sent to dealers, explanation of such omission must be made below.)
	ABSENCE OF ADVERTISING
3.	Without advertising, under an exigency of the service which existed prior to the order and would not admit of the delay incident to advertising.
4.	Without advertising in accordance with
	Without advertising, it being impracticable to secure competition because of
	, (Here state in detail the nature of the exigency or circumstances under which the securing of competition was impracticable under 3 and 4)
proles aw	Note.—The above form "Method of or Absence of Advertising" is to be used when purchases are made or services secured under oper authority without written agreement in any form. In case of a written agreement (formal contract, proposal, and acceptance, or s formal agreement) Standard Form No. 1036—Revised should be used for abstracting the method of or absence of advertising and ard of contract. (See General Regulations No. 51, as amended.)

18-22900-2 U. S. GOVERNMENT PRINTING OFFIC

Standard Form No. 1025a—Revised

Frim prescribed by September 7, 1050

September 7, 1050

(Gen. Reg. No. 51, Supp. No. 11)

Standard Form No. 1025a—Revised

For Release 2000/04/17 CIA-RDP64-60360R000562050R2050UM

September 7, 1050

Services Other Than Personal

CONTINU.	ATION	SHEET
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, S	COST RE	(Department, bureau, or establishment)					
lo. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES  (Enter description, item number of contract or Federal supply and other information deemed necessary)	y schedule, QUAN-	Cost	PRICE	AMOUN Dollars	Cts.
		Contract AlOl - Costs applicable all systems	to				
		Direct Costs Properly Chargeable Contract AlOl for the period 6/3 thru 6/9/57	to /57				
		Labor Week Ending June 9, 1957				3	2.5
		Overhead computed for Electronic Instrumentation Division at interate of 145% of 32.50	erim			14	7.1
		Other Costs					
0. #27-	38760	CK #13115	25X1 <b>A</b> 5a1				L5-5
		Total Labor, Overhead and Other	Costs			9	95.3
		G & A expense computed at interrete of 9% of \$95.15	im				8.
		Total Costs				\$1	03.